

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>WPM/61</i>	<i>7/13/99</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>59</i>	<i>7/16</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>60/25</i>	<i>7/26/99</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date									
Final	Original	9/26	9/27	10/2	10/23	11/3	11/30			
1	✓	✓	✓	✓	✓	✓	✓			
2	✓	✓	✓	✓	✓	✓	✓			
3	✓	✓	✓	✓	✓	✓	✓			
4	✓	✓	✓	✓	✓	✓	✓			
5	✓	✓	✓	✓	✓	✓	✓			
6	✓	✓	✓	✓	✓	✓	✓			
7	✓	✓	✓	✓	✓	✓	✓			
8	✓	✓	✓	✓	✓	✓	✓			
9	✓	✓	✓	✓	✓	✓	✓			
10	✓	✓	✓	✓	✓	✓	✓			
11	✓	✓	✓	✓	✓	✓	✓			
12	✓	✓	✓	✓	✓	✓	✓			
13	✓	✓	✓	✓	✓	✓	✓			
14	✓	✓	✓	✓	✓	✓	✓			
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If more than 150 claims or 10 actions  
staple additional sheet here

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